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Inverse Psoriasis Induced by Terbinafine

Sir.

Terbinafine is an allylamine, it is a lipophilic compound used for the treatment of onychomycoses and other fungal infections. Adverse effects are reported in 10.4% of patients, with cutaneous reactions in 2.7% (1). These include severe reactions, such as erythema multiforme, Stevens-Johnson syndrome, toxic epidermal necrolysis (1, 2), cutaneous lupus erythematosus (3) and acute generalized exanthematous pustulosis (4). Recently terbinafine has been linked with the occurrence of psoriasis *de novo* or its exacerbation (1, 2, 5). We report here the first case of inverse psoriasis induced by terbinafine.

CASE REPORT

A 74-year-old woman, suffering from a long history of fingernail dystrophy, was treated with oral terbinafine, 250 mg/day, by her general practitioner. Onychomycosis was diagnosed clinically. No other skin lesions were noted at that time. Two weeks after the beginning of the treatment, she developed erythematous and scaling lesions of the groin, vulva, submammary folds, axillae and navel. The whole scalp showed red and scaling patches of varying size. Pitting, subungual hyperkeratosis and onycholysis of the fingernails were present. All features were consistent with a diagnosis of inverse psoriasis associated with fingernails and scalp psoriasis. There was no personal history of psoriasis, but her first cousin was affected with psoriasis. She was on no other medications. Routine blood screening was negative or within normal limits. Terbinafine was discontinued and this was followed by rapid improvement of the psoriasis which, with only topical drugs, almost completely disappeared in 2 weeks, except for the fingernail dystrophy.

CONCLUSION

In this case, a probable psoriatic onychodystrophy, misdiagnosed as onychomycosis, without mycological investigation and treated with terbinafine, induced an inverse psoriasis. We emphasize the importance of mycological investigation before commencing therapy for suspected onychomycosis. This case and other reports suggest prudence when terbinafine is used for onychomycosis or dermatophytosis in patients with coexistent psoriasis.

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